

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO.

10-609-473

FILING DATE

07-01-03

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2		1				
3		2				
4		2				
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TOTAL IND.	1					
TOTAL DEP.	39	↔	↔	↔		
TOTAL CLAIMS	40	████	████	████	████	████

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TOTAL IND.				
TOTAL DEP.		↔	↔	↔
TOTAL CLAIMS		████	████	████